

81-30-06

PART B - FEE(S) TRANSMITTAL

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**Mail Stop ISSUE FEE
Commissioner for Patents
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or Fax (571) 273-2885**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated in Block 1. If indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

32615 7590 11/10/2005
OSHA LIANG L.L.P./SUN
1221 MCKINNEY, SUITE 2800
HOUSTON, TX 77010

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)
(Signature)
(Date)

01/31/2006 KBETEMAE2 00000068 09993939

01 FC:1501 1400.00 OP
02 FC:1504 300.00 OP
03 FC:8001 6.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/993,939	11/06/2001	Gordon Good	13220.008001; P5843	5488

TITLE OF INVENTION: CHANGE SEQUENCE NUMBER GENERATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	02/10/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
DODDS, HAROLD E	2168	707-203000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
1 Osha * Liang LLP
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SUN MICROSYSTEMS, INC.

SANTA CLARA, CA USA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies (2)

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.
☒ Payment by credit card. Form PTO-2038 is attached.
☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0591 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature T. Chyan Liang
Typed or printed name T. Chyan Liang

Date January 27, 2006
Registration No. _____

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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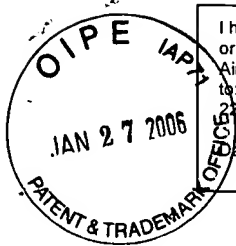
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/993,939-Conf. #5488
		Filing Date	November 6, 2001
		First Named Inventor	Gordon Good
		Examiner Name	H. E. Dodds
		Art Unit	2168
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	13220/008001; P5843
TOTAL AMOUNT OF PAYMENT		(\$)	1,706.00

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account	Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha · Liang LLP</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description						Small Entity	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
<u>15</u>	<u>- 38 =</u>	<u>x</u>	<u>=</u>	Fee (\$)	Fee Paid (\$)		
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
<u>3</u>	<u>- 6 =</u>	<u>x</u>	<u>=</u>				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
<u> </u>	<u>- 100 =</u>	<u>/50</u>	<u>(round up to a whole number) x</u>	<u>=</u>			
4. OTHER FEE(S)							
						Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1501 Utility issue fee						1,400.00	
1504 Publication fee for early, voluntary, or normal ...						300.00	
8001 Printed copy of patent w/o color						6.00	

SUBMITTED BY			
Signature	<u>T. Chyan Liang</u>	Registration No. (Attorney/Agent)	46,479
Name (Print/Type)	<u>Robert P. Lord</u>	Telephone	(713) 228-8600
	<u>T. Chyan Liang #48,885</u>	Date	January 27, 2006

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV710216986US, on the date shown below in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Dated: January 27, 2006	Signature <u>Grace A. Wise</u> (Grace A. Wise)



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Dated: January 27, 2006

Signature: _____

(Grade A. Wise)

Docket No.: 13220/008001; P5843
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Gordon Good, et al.

Application No.: 09/993,939

Group Art Unit: 2168

Filed: November 6, 2001

Examiner: H. E. Dodds

For: CHANGE SEQUENCE NUMBER
GENERATOR

TRANSMITTAL LETTER

MS Issue Fee

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

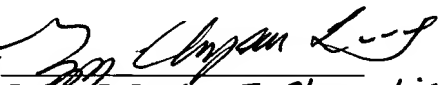
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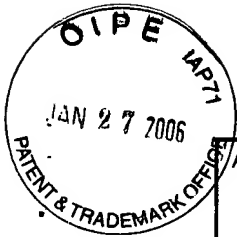
1. Fee Transmittal (1 page);
2. Part B- Fee(s) Transmittal (1 page);
3. Payment by credit card. Form PTO-2038 is attached (1 page); charge \$1706.00 to credit card;
4. Return Receipt Postcard (1 page); and
5. Certificate of Express Mailing (1 page).

The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0591, under Order No. 13220/008001; P5843.

Dated: January 27, 2006

Respectfully submitted,

By 
for Robert P. Lord T. Chyan Liang
Registration No.: 46,479 #48,885
OSHA • LIANG LLP
1221 McKinney St., Suite 2800
Houston, Texas 77010
(713) 228-8600
Attorney for Applicants



Application No. (if known): 09/993,939

Attorney Docket No.: 13220/008001; P5843

Certificate of Express Mailing Under 37 CFR 1.10

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Signature

Grace A. Wise

Typed or printed name of person signing Certificate

Registration Number, if applicable

(713) 228-8600
Telephone Number

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Part B- Fee Transmittal (1 page)
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